

L13000044769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

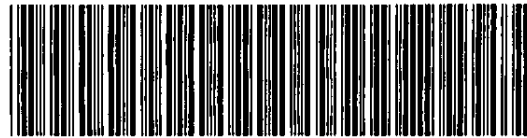
(Business Entity Name)

(Document Number)

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FILED
2013 APR 24 PM 4:57
CLERK OF COURT
TALLAHASSEE FLORIDA

APR 25 2013

D. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 10, 2013

ISABEL BERMUDEZ
1150 GREENSTONE BLVD, APT. 204
HEATHROW, FL 32746

SUBJECT: CARRIBBEAN PALMS TRANSPORTATION LLC.
Ref. Number: L13000044769

We have received your document for CARRIBBEAN PALMS TRANSPORTATION LLC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 313A000084769

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2013 APR 24 PM 4:57

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CARIBBEAN PALMS Transportation
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Isabel Bermudez
Name of Person

Caribbean Palms transportation
Firm/Company

1150 GREENSTONE BLVD Apt 204
Address

Heathrow Florida 32746
City/State and Zip Code

info@caribbeanpalmstransportation
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Isabel Bermudez at (321) 363-4504
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
2013 APR 24 PM 4:57
TALLAHASSEE FLORIDA

ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:

Caribbean Palms transportation

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☐ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Caribbean should be with the
single "R"

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: 04/22/2013

Isabel Bernudez

Signature of a member or authorized representative of a member

Isabel BERNUDEZ

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

2013 APR 24 PM 4:57
CLERK OF COURT
TALLAHASSEE FLORIDA

FILED

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L13000044769
FILED 8:00 AM
March 26, 2013
Sec. Of State
stoner

Article I

The name of the Limited Liability Company is:
CARRIBBEAN PALMS TRANSPORTATION LLC.

Article II

The street address of the principal office of the Limited Liability Company is:
1150 GREENSTONE BLVD SUITE 204
LAKE MARY, FL. US 32746

The mailing address of the Limited Liability Company is:
1150 GREENSTONE BLVD SUITE 204
LAKE MARY, FL. US 32746

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
ISABEL BERMUDEZ
1150 GREENSTONE BLVD SUITE 203
LAKE MARY, FL. 32746

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: ISABEL BERMUDEZ

Article V

The name and address of managing members/managers are:

Title: MGR
ISABEL BERMUDEZ
1150 GREENSTONE BLVD SUITE 204
LAKE MARY, FL. 32746 US

L13000044769
FILED 8:00 AM
March 26, 2013
Sec. Of State
stoner

Article VI

The effective date for this Limited Liability Company shall be:

03/25/2013

Signature of member or an authorized representative of a member

Electronic Signature: ISABEL BERMUDEZ

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.